

## **MEMBERSHIP APPLICATION**

## **GENERAL INFORMATION**

(PLEASE PRINT)

Type of Membership being applied for:				
Fire Cadet	Firefighter			
Associate Member	Fire Police			
Name:				
Address:				
Phone (Home)	_Cell			
Date of Birth:				
E-Mail Address				
Marital Status: Spo	use:			
Are you aware of any medical conditions that firefighter?YesNO	t would prevent you from becoming a			
If Yes please explain:				
Date of last physical examination:				
Are you a high school graduate or equivalent	?			
EXPERIE	NCE			
Have you ever been a member of any emergeYesNo	ncy service organization?			
If yes, please list dates, reason for leaving, ref offices held:	ference with phone numbers and any			
Revised 03/2015				

List all emergency training you have attended (attach copies of all certificates)					
Have you ever applied to another volunteer emergency service and been denied?					
Are you currently a certified Firefighter? FD ID Number					
Have you ever been a member of any branch of the military?  If yes, what was the date and type of discharge?					
EMPLOYMENT HISTORY					
Company:					
Address:					
Phone: Supervisor:					
Job Title:					
Company:					
Address:					
Phone: Supervisor:					
Job Title:					
Have you ever been convicted of a crime?YesNo					
Will you authorize the West Wildwood Fire Dept to conduct a criminal background check? Yes No					
Arson Conviction?YesNo					
If yes, please explain:					
Do you currently possess a valid New Jersey driver's license?YesNo					
Driver's license number:					
Has your driver's license ever been revoked?					
If yes, explain:					

What are your goals if accepted into the West Wildwood FD?
Are you afraid of heights?
Claustrophobic?
Are you able to lift and carry heavy objects or people?
Are you able to stay calm in stressful situations?
Are you able to make quick decisions under stress?
Do you have trouble taking directions from supervisors or people of higher authority?
Would your current job prohibit you from responding to calls at any time?
If accepted into West Wildwood Fire Dept. there will be a (12) month probation period and you will be required to make a minimum of 50% of all calls, which include fires, drills, and meetings. Do you think that you could meet this requirement?

## **REFERENCES**

Please list 3 non-family Name:		ddress:		Phone:		
Name: Address:			Phone:			
Reference Signa				Date:		
2	_					
Reference Signature:				Date:	Date:	
3						
3						
Did a firefighter recom	mend that yo	u join the o	lepartment? _	Yes	No	
If so, who?						
HEALTH HAS BEEN DETA THE RULES, REGULATIO	NS, AND BY-LA	WS OF THE	FIRE COMPAN	VY.		
Signature:						
Do not write below this line						
Membership: A	pproved	Denied	Date:			
Reason for denial:						
Probation begins:			End:			
Membership proposed	by:					
Type of membership: _						
Approval or denial lett	er sent:	_Yes	No	Date		